Current Mailing Address: P. O. BOX 18257 PANAMA CITY BEACH, FL 32417 US				
FEI Number: 20-2184940			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
SLOAN, TIMOTHY 427 MCKENZIE AVENUE PANAMA CITY, FL 32401 US				
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.				
SIGNATURE: TIMOTHY SLOAN 01/28/2019				
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	VP	Title	SECRETARY	
Name	POWELL, HOSIE	Name	PELLEGRINI, FRANK	
Address	410 PARADISE AVENUE	Address	440 PARADISE BLVD	
City-State-Zip:	PANAMA CITY BEACH FL 32417	City-State-Zip:	PANAMA CITY BEACH FL 32411	
Title	PRESIDENT	Title	DIRECTOR	
Name	HENDERSON, JAMES	Name	MALFARA, RICK	
Address	409 PARADISE BLVD	Address	441 PARADISE BLVD	
City-State-Zip:	PANAMA CITY BEACH FL 32417	City-State-Zip:	PANAMA CITY BEACH FL 32411	
Title	DIRECTOR			
Name	HANKS, NICOLE			
Address	468 PARADISE BLVD			
City-State-Zip:	PANAMA CITY BEACH FL 32411			

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0500000297

Entity Name: PARADISE GROVE OWNERS' ASSOCIATION, INC.

## **Current Principal Place of Business:**

11800 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32407

## (

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HENDERSON, JAMES

PRESIDENT

01/28/2019

Electronic Signature of Signing Officer/Director Detail

FILED Jan 28, 2019 **Secretary of State** 2765401470CC